### Case 19-33082-SLM Doc 27 Filed 04/02/20 Entered 04/02/20 12:50:34 Desc Main Document Page 1 of 7

Fill in this information to identify your case:						
Debtor 1	Mark J. Dippel First Name	- Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	kruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case number _1	9-33082					

Check if this is an amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	322,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	68,433.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	390,433.00
Par	t 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	324,286.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	47,417.56
	Your total liabilities	\$	371,703.56
Par	t 3: Summarize Your Income and Expenses		
١.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,356.09
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,201.94
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other s	chedules.
	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1 Mark J. Dippel Case number (if known) 19-33082

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_5,647.51

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this information	to identify your case:	
Debtor 1	Mark J. Dippel	
Debtor 2 (Spouse, if filing)		
United States Bankru	ptcy Court for the: DISTRICT OF NEW JERSEY	
	9-33082	Check if this is:
(If known)		An amended filing
Official Form	n 106l	A supplement showing postpetition chapter 13 income as of the following date:  MM / DD/ YYYY
<b>^</b> 1 1 1 1	<b>1</b> /	

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse	
If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>	<ul><li>■ Employed</li><li>□ Not employed</li></ul>	
employers.	Occupation	Retired	Not Working	
Include part-time, seasonal, or self-employed work.	Employer's name	On Social Security and Pension	Not working for over 6 months	
Occupation may include student or homemaker, if it applies.	Employer's address		Sick can not work	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 0.00

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

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Debt	or 1	Mark J. Dippel	_	Case number (if known)	19-33082	
	Copy	y line 4 here	4.	For Debtor 1 \$0.00	For Debtor	
5.	List	all payroll deductions:				
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ \$ \$ \$ \$ \$ + \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$0.00	\$	0.00
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$	0.00
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:  help from family  Tax Refund	8c. 8d. 8e.	\$ 0.00 \$ 0.00 \$ 0.00 \$ 323.00 \$ 4,887.51 - \$ 760.00 \$ 385.58	\$ 	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$6,356.09	\$	0.00
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	6,356.09 + \$	0.00	<b>= \$ 6,356.09</b>
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not cify:	depen	•	ted in <i>Schedul</i>	e J. +\$0.00_
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certales				\$6,356.09
13.	Do y ■	ou expect an increase or decrease within the year after you file this form  No.  Yes Explain:	?			monthly income

	in this informa	ation to identify yo	our case:							
Deb	otor 1	Mark J. Di	ppel			Ch	eck if			
Deh	otor 2							amended filing	ving postpetition chapte	r
	ouse, if filing)					"	13 e	expenses as of	the following date:	
Uni	ted States Bankı	ruptcy Court for the	: DISTRI	CT OF NEW JERSEY			MM	/ DD / YYYY		
Cas	se number 1	9-33082								
(If k	nown)									
0	fficial Fo	rm 106J				-				
S	chedule	J: Your	Exper	ises					12	/1
Be info	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	s possible eded, atta ry questio	If two married people ar ch another sheet to this						
Par 1.	Is this a join	ribe Your House nt case?	hold							_
	■ No. Go to									
	☐ Yes. <b>Doe</b>	es Debtor 2 live	in a separ	ate household?						
	□N									
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	ebtor 2			
2.	Do you hav	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			Dependent's age	Does dependent live with you?	
	Do not state dependents				Grandson			3	□ No ■ Yes	
	'								□ No	
					Son			19	■ Yes □ No	
					Daughter			22	■ Yes	
									□ No	
2	De veur ev	aanaaa inaluda	_						☐ Yes	
3.	expenses o	penses include of people other to d your depende	han $\square$	No Yes						
		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
•		es paid for with	non-cash	government assistance i	f you know					
the		h assistance an		cluded it on Schedule I: )			_	Your expo	enses	
4.		or home owners		ses for your residence. In	nclude first mortgag	e 4.	\$		2,503.94	
	If not include	ded in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	4b. Prope	rty, homeowner's				4b.	\$ _		0.00	
		e maintenance, re eowner's associat		ıpkeep expenses dominium dues		4c. 4d.			0.00	
5.				our residence, such as ho	me equity loans	5.			0.00	

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Utilities:	ebtor 1 _1	Mark J. Dippel	Case number (if known)	19-33082
6a.   S.   S.   S.   S.   C.	Utilitie	s:		
6b. Vater, sewer, garbage collection 6c. Telephone, cell phone, internet, statellite, and cable services 6c. S			6a. \$	550.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 460.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 800.00 Food and housekeeping supplies 7. \$ 0.00 Food and housekeeping supplies 7. \$ 0.00 Food and housekeeping supplies 8. \$ 0.00 Food food food food food food food food			·	
6d. Other, Specify:  6d. \$ 0,00  Food and housekeeping supplies  7. \$ 800,00  Childcare and children's education costs  8. \$ 0,00  Personal care products and services  10. \$ 300,00  Personal care products and services  11. \$ 220,00  Transportation, Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 100,00  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. \$ 0,00  15c. Vehicle insurance  15c. \$ 0,00  15c. Vehicle insurance  15d. \$ 0,00  15c. Vehicle insurance  15d. \$ 0,00  15d. Other insurance, posephy  Insulament or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other, Specify:  17d. Other, S				
Food and housekeeping supplies   7. \$   8.00.00			· —	
Childcare and children's education costs  Clothing, laundry, and dry cleaning  Personal care products and services  10. \$ 0.00  Medical and dental expenses  11. \$ 220.00  Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 100.00  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. \$ 0.00  15c. Vehicle insurance  15c. \$ 2233.00  15c. Vehicle insurance  15d. \$ 0.00  15c. Vehicle insurance  15d. Other insurance, speedly.  15d. Other, speedly.  15d. Other				
Clothing, laundry, and dry cleaning			• -	
Personal care products and services			·	
Medical and dental expenses	Clothir	ng, laundry, and dry cleaning	· —	
Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Entertainment, clubs, recreation, newspapers, magazines, and books  Router and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance educted from your pay or included in lines 4 or 20.  15b. Health insurance   15b. \$				
Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations Isusurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance, specily:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specily:  15c. S 233.00  15d. Other insurance, specily:  16. \$ 0.00  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specily:  16. \$ 0.00  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specily:  17a. Car payments for Vehicle 1  17a. Car payments for Vehicle 2  17b. \$ 0.00  17c. Other, Specify:  17c. Other, Specify:  17c. Other, Specify:  17d. S 0.00  Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 108).  Other payments you make to support others who do not live with you.  Specify:  19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20b. \$ 0.00  20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00  20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00  20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00  20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00  20d. Mortgages on other property  22a. Add lines 22a and 22b. The result is your monthly expenses from your monthly expenses from your monthly expenses from your monthly expenses.  21d. \$ 6, 201.94  22c. Add line 22a and 22b. The result is your monthly income.  The result is your monthly expenses from your monthly income.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly expenses from your expenses within the year of do you expect your mortgage payment to			11. \$	220.00
Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 100.00 Charitable contributions and religious donations  14. \$ 100.00 Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. \$ 0.00 15b. Health insurance  15c. Vehicle insurance  15c. Vehicle insurance  15c. Vehicle insurance  15c. Vehicle insurance. Specify:  15d. \$ 0.00 15d. Other insurance. Specify:  15d. \$ 0.00 15d. Other insurance. Specify:  15d. \$ 0.00 15d. Other insurance. Specify:  16c. \$ 0.00 15d. Other insurance. Specify:  17a. Car payments for Vehicle 1 17a. \$ 315.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17d. Other. Specify:  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other specify:  17d. S 0.00 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I).  18 \$ 0.00 19 Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I).  19 Other real property expenses not included in lines 4 or 5 of this form on Schedule 1. Your Income.  20a. Mortgages on other property  20a. \$ 0.00 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance  20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00 20d. A one of the property and upkeep expenses of Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses from your monthly expenses from line 22c above.  23a. Copy line 12 (your combined monthly income) from Schedule 1.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly expenses from your expenses within the year after you file this form?  For exa	Transp	portation. Include gas, maintenance, bus or train fare.	_	
Charitable contributions and religious donations   14. \$   100.00   Insurance   Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15b. \$   0.00   15b. Health insurance   15b. \$   0.00   15c. Vehicle insurance   15c. \$   233.00   15c. Vehicle insurance   15d. \$   0.00   15d. Other insurance   Specify:   16d. \$   0.00   15d. Other insurance   15d. \$   0.00   15d. Other payments for Vehicle 1   17a. \$   315.00   17b. Car payments for Vehicle 2   17b. \$   0.00   17c. Other. Specify:   17c. \$   0.00   17d. Other. Specify:   17d. \$   0.00   17d. Other. Specify:   17d. \$   0.00   17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18. \$   0.00   18d. \$   0.00   19d. Other payments you make to support others who do not live with you. \$   0.00   19d. Other payments you make to support others who do not live with you. \$   0.00   20d. Real estate taxes   20d. \$   0.00   20d. Real estate taxes   20d. \$   0.00   20d. Real estate taxes   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   0.00   20d. Description   0.	Do not	include car payments.	12. \$	500.00
Charitable contributions and religious donations   14. \$   100.00   Insurance   Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15b. \$   0.00   15b. Health insurance   15b. \$   0.00   15c. Vehicle insurance   15c. \$   233.00   15c. Vehicle insurance   15d. \$   0.00   15d. Other insurance   Specify:   16d. \$   0.00   15d. Other insurance   15d. \$   0.00   15d. Other payments for Vehicle 1   17a. \$   315.00   17b. Car payments for Vehicle 2   17b. \$   0.00   17c. Other. Specify:   17c. \$   0.00   17d. Other. Specify:   17d. \$   0.00   17d. Other. Specify:   17d. \$   0.00   17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18. \$   0.00   18d. \$   0.00   19d. Other payments you make to support others who do not live with you. \$   0.00   19d. Other payments you make to support others who do not live with you. \$   0.00   20d. Real estate taxes   20d. \$   0.00   20d. Real estate taxes   20d. \$   0.00   20d. Real estate taxes   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   20d. \$   0.00   20d. Maintenance, repair, and upkeep expenses   0.00   20d. Description   0.	Enterta	ainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. S 0.00  15d. Other insurance. Specify: 15d. S 0.00  15d.				
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. \$ 0.00  15c. Vehicle insurance, Specify: 15d. S 0.00  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 15d. S 0.00  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16c. \$ 0.00  Installment or lease payments: 17a. Car payments for Vehicle 1 17a. S 315.00  17b. Car payments for Vehicle 2 17b. \$ 0.00  17c. Other. Specify: 17c. S 0.00  17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other payments of vehicle 2 17d. Other payments of vehicle 2 17d. Other payments of use			🗸	
15a. Life insurance       15a. \$       0.00         15b. Health insurance       15b. \$       0.00         15c. Vehicle insurance. Specity:       15c. \$       0.00         15d. Other insurance. Specity:       15d. \$       0.00         Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         Specify:       16. \$       0.00         Installment or lease payments:       17a. \$       315.00         17a. Car payments for Vehicle 1       17a. \$       3.15.00         17b. Car payments for Vehicle 2       17b. \$       0.00         17c. Other. Specify:       17c. \$       0.00         17d. Other. Specify:       17c. \$       0.00         17d. Other. Specify:       17d. \$       0.00         Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l).       18. \$       0.00         Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l).       18. \$       0.00         Your payments of alimony, maintenance, and support that you make to support others who do not live with you.       18. \$       0.00         Other Specify:       20a.				
15b.   Health insurance   15b.   \$   0.00     15c.   Vehicle insurance   15c.   \$   233.00     15c.   Vehicle insurance   15c.   \$   233.00     15c.   Vehicle insurance   5cc.   \$   233.00     15c.   Vehicle insurance   5cc.   \$   233.00     15c.   Vehicle insurance   5cc.   \$   233.00     15c.   Vehicle   Specify:   15c.   \$   0.00     17c.   Specify:   17a.   \$   315.00     17b.   Car payments for Vehicle   1   7a.   \$   315.00     17b.   Car payments for Vehicle   1   7b.   \$   0.00     17c.   Other. Specify:   17c.   \$   0.00     17c.   Other. Specify:   17c.   \$   0.00     17d.   Other. Specify:   17d.   \$   0.00     18e.   O.00   Other payments you make to support others who do not live with you.   \$   0.00     18e.   O.00   Other payments you make to support others who do not live with you.   \$   0.00     18e.   O.00   Other payments you make to support others who do not live with you.   \$   0.00     19d.   Other payments you make to support others who do not live with you.   \$   0.00     19d.   Other payments you make to support others who do not live with you.   \$   0.00     19d.   Other payments you make to support others who do not live with you.   \$   0.00     19d.   Other payments you make to support others who do not live with you.   \$   0.00     20d.   Mortgages on other property   20a.   \$   0.00     20d.   Mortgages on other property   20a.   \$   0.00     20d.   Real estate taxes   20b.   \$   0.00     20d.   Maintenance, repair, and upkeep expenses   20d.   \$   0.00     20d.   Homeowner's association or condominium dues   20e.   \$   0.00     20d.   Homeowner's association or condominium dues   20e.   \$   0.00     20d.   Homeowner's association or condominium dues   20e.   \$   0.00     20d.   Other power   20e.   \$   0.00     2		, , ,	150 ¢	0 00
15c. Vehicle insurance. Specify:  15d. Other insurance. Specify:  15d. Specify:  15d. \$ 0.00  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17a. Car payments for Vehicle 1  17a. \$ 315.00  17b. Car payments for Vehicle 2  17b. Specify:  17c. Other. Specify:  17c. Other. Specify:  17c. Other. Specify:  17d. Specify:  17			· .	
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22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. Subtract your monthly net income.  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.		• •		
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	For exar modifica	mple, do you expect to finish paying for your car loan within the year or do you expec		crease or decrease because of a
Yes. Explain here:	<b>—</b> 110.			

Fill in this information to identify your case:					
Debtor 1	Mark J. Dippel	-			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number	19-33082				
(if known)					

Check if this is an amended filing

#### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Dic	d you pay or agree to pay someone who is NOT a	attorney to help you fill out bankruptcy forms?
	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have read th t they are true and correct.	summary and schedules filed with this declaration and
X	/s/ Mark J. Dippel	X
	Mark J. Dippel Signature of Debtor 1	Signature of Debtor 2
	Date April 2, 2020	Date

Official Form 106Dec